

# Quarterly Totals

## Demographic Reporting Form

Positive Alternatives

Date: January 1- March 31, 2016 Grantee Name: Highland LifeCare Center

### 1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	3	1	9	13	4	7	0

### 2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
14	4	4	6	9

### 3. Client Marital Status:

Married	Not Married	Marital Status Unknown
14	21	2

### 4. Client Race:

Race: White	Race: African-American	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
11	7	5	0	4	4	6

### 5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown
0	31	6